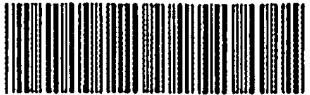


Index of Claims				Application No.	Applicant(s)						
				09/731,836	WRENCH, EDWIN H.						
				Examiner		Art Unit					
				Courtney D. Fields		2137					
<input checked="" type="checkbox"/> <b>Rejected</b> <input type="checkbox"/> <b>Cancelled</b> <input type="checkbox"/> <b>Allowed</b>		<input type="checkbox"/> <b>(Through numeral) Cancelled</b> <input type="checkbox"/> <b>Restricted</b>		<input type="checkbox"/> <b>Non-Elected</b> <input type="checkbox"/> <b>Interference</b>	<input type="checkbox"/> <b>Appeal</b> <input type="checkbox"/> <b>Objected</b>						
Claim	Date			Claim	Date			Claim	Date		
Final	Original			Final	Original			Final	Original		
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2	✓	✓	✓	52				102			
3	✓	✓	✓	53				103			
4	✓	✓	✓	54				104			
5	✓	✓	✓	55				105			
6	✓	✓	✓	56				106			
7	✓	✓	✓	57				107			
8	✓	✓	✓	58				108			
9	✓	✓	✓	59				109			
10	✓	✓	✓	60				110			
11	✓	✓	✓	61				111			
12	✓	✓	✓	62				112			
13	✓	✓	✓	63				113			
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18	✓	✓	✓	68				118			
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